FORM B1 United States Bankruptcy Court WESTERN District of NEW YORK		Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle):	Name of Joint Debtor (Spouse)(Last, First,	Middle):	
Gutkowski, Kenneth J.			
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names): NONE	Gutkowski, Laurie J. All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names): fka Laurie J. Krone		
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all)2190	Last four digits of Soc. Sec. No./Compete EIN or other Tax I.D. No.		
Street Address of Debtor (No. & Street, City, State & Zip Code):	(if more than one, state all). 4723 Street Address of Joint Debtor (No. & Street, City, State & Zip Code):		
7192 Erie Rd.	7192 Erie Rd.		
Derby NY 14047	Derby NY 14047		
County of Residence or of the Principal Place of Business: Erie	County of Residence or of the Principal Place of Business: Erie		
Mailing Address of Debtor (if different from street address): SAME	Mailing Address of Joint Debtor (if different from street address):		
SAME	SAME		
Location of Principal Assets of Business Debtor (If different from street address above): NOT APPLICABLE			
Information Regarding the Debtor (Check the Applicable Boxes)			
Venue (Check any applicable box)			
Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
Type of Debtor (Check all boxes that apply)	Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box)		
☐ Individual(s) ☐ Railroad ☐ Stockbroker	☐ Chapter 7 ☐ Chapter 11	Chapter 13	
☐ Partnership ☐ Commodity Broker	Chapter 9 Chapter 12	☐ Ghapter 13	
☐ Other ☐ Clearing Bank	Sec. 304 - Case ancillary to foreign	proceeding	
Nature of Debts (Check one box)	Filing Fee (Check one boy)		
☐ Consumer/Non-Business ☐ Business	Filing Fee (Check one box) Full Filing Fee attached		
Chapter 11 Small Business (Check all boxes that apply)	Filing Fee to be paid in installments (Applicable to individuals only)		
☐ Debtor is a small business as defined in 11 U.S.C. § 101	Must attach signed application for the court's consideration		
☐ Debtor is and elects to be considered a small business under	certifying that the debtor is unable to pay fee except in installmen		
11 U.S.C. § 1121(e) (Optional)	Rule 1006(b). See Official Form No.	. 3.	
Statistical/Administrative Information (Estimates only)	THIS S	PACE IS FOR COURT USE ONLY	
Debtor estimates that funds will be available for distribution to unsecured c	reditors.		
Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.			
Estimated Number of Creditors 1-15 16-49 50-99 100-199 200-			
Estimated Assets			
\$0 to \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001 to \$1	50,000,001 to More than \$100 million \$100 million		
Estimated Debts			
\$0 to \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$150,000,001 to \$150,000 \$100	50,000,001 to More than \$100 million \$100 million		

(Official Form 1) (12/03) West Group, Rochester, NY			
Voluntary Petition	Name of Debtor(s): FORM B1, Page 2		
(This page must be completed and filed in every case)	Kenneth J. Gutkowski and		
Drier Benkruptey Cose Filed Within Leat 6)	Laurie J. Gutkowski		
Prior Bankruptcy Case Filed Within Last 6			
Location Where Filed:	Case Number:	Date Filed:	
NONE	lista afthia Dahtan na		
Pending Bankruptcy Case Filed by any Spouse, Partner or Aff	_		
Name of Debtor:	Case Number:	Date Filed:	
NONE			
District:	Relationship:	Judge:	
Signatures			
Signature(s) of Debtor(s) (Individual/Joint)		hibit A	
I declare under penalty of perjury that the information provided in this	(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange		
petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts	Commission pursuant to Section 13 or 15(d) of the Securities		
and has chosen to file under chapter 7] I am aware that I may proceed	Exchange Act of 1934 and is requesting relief under Chapter 11)		
under chapter 7, 11, 12, or 13 of title 11, United States Code, understand	Exhibit A is attached and made a part of this petition		
the relief available under each such chapter, and choose to proceed			
under chapter 7.	Exhibit B		
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.		ted if debtor is an individual	
Code, specified in this petition.	whose debts are primarily consumer debts)		
X <u>/s/ Kenneth J. Gutkowski</u> Signature of Debtor	I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under		
-	chapter 7, 11, 12, or 13 of title 11, U		
X <u>/s/ Laurie J. Gutkowski</u> Signature of Joint Debtor	explained the relief available under each such chapter.		
Signature of Joint Deptor	X /s/ Peter D. Grubea		
Telephone Number (If not represented by attorney)	Signature of Attorney for Debtor(s)	Date	
(interroptional system)	_		
Date		hibit C	
	Does the debtor own or have possor or is alleged to pose a threat of imr		
Signature of Attorney	public health and safety?	Tillient and identifiable harm to	
		d and made a part of this petition.	
X /s/ Peter D. Grubea Signature of Attorney for Debtor(s)	⊠ No	·	
	Signature of Non-At	ttorney Petition Preparer	
Peter D. Grubea Printed Name of Attorney for Debtor(s)	I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C.		
, , , ,	§ 110, that I prepared this document for compensation, and that I have		
<u>Law Office of Peter D. Grubea</u> Fim Name	provided the debtor with a copy of this document.		
482 Delaware Ave.			
Address	Printed Name of Bankruptcy Petition Preparer		
	Social Security Number		
Buffalo NY 14202			
	Address		
(716) 853-1366			
Telephone Number Date			
Signature of Debtor (Corporation/Partnership)			
I declare under penalty of perjury that the information provided in this	Names and Social Security number	hers of all other individuals who	
petition is true and correct, and that I have been authorized to file this	prepared or assisted in preparing		
petition on behalf of the debtor.		•	
The debtor requests relief in accordance with the chapter of title 11,			
United States Code, specified in this petition.			
ornica diated dode, opcomed in the petition.	If more than one person prepare	d this document, attach additional	
l _v		riate official form for each person.	
X			
organizate of Authorized individual	l x		
Drinted Name of Authorized Institute	Signature of Bankruptcy Petition Prepare	r	
Printed Name of Authorized Individual			
	Date		
Title of Authorized Individual	A bankruptcy petition preparer's failu	re to comply with the provisions	
Data	of title 11 and the Federal Rules of B		
Date			

American Express
P.O. Box 360001
Ft. Lauderdale, FL 33336

Bon-Ton P.O. Box 2285 York, PA 17405

Capital One P.O. Box 790216 St. Louis, MO 63179

Citifinancial 141 Buffalo St., Ste. 15 P.O. Box 208 Hamburg, NY 14075

Citizens Auto
PO Box 42115
Providence, RI 02940-2115

GC Services Collection Agency 6330 Gulfton Houston, TX 77081

Household Bank
P.O. Box 4153
Carol Stream, IL 60128

HSBC P.O. Box 4215 Buffalo, NY 14240

JC Penney
P.O. Box 960001
Orlando, FL 32896

Kaleida Health P.O. Box 2330 Buffalo, NY 14240

Lane Bryant
P.O. Box 659562
San Antonio, TX 78265

MFHS Physicians ER Services Dept. 744, P.O. Box 8000 Buffalo, NY 14267 Saxon Mortgage Services P.O. Box 161489 Ft. Worth, TX 76161

Sears
P.O. Box 182156
Columbus, OH 43218

Target/Retailers National Bank P.O. Box 59317 Minneapolis, MN 55459

Twin City Ambulance 1001 Erie Ave. N. Tonawanda, NY 14120

Union Plus c/o Household Credit Services P.O. Box 88000 Baltimore, MD 21288

Wells Fargo Bank 3476 Stateveiw Blvd. Ft. Mill, SC 29715

Western New York Dental 5907 South Park Ave Hamburg, NY 14075